

APPENDIX I, EXHIBIT 1**TCOC BENCHMARK**

Contract Year 1

Listed below are the Per Member Per Month (PMPM) TCOC Benchmarks for Contract Year 1 (March 1, 2018 through December 31, 2018), subject to state appropriation and all necessary federal approvals.

TCOC Benchmarks do not include EOHHS adjustments described in **Sections 4.3.D.2** and of the Contract.

<u>ACO TCOC Benchmark / RC I Adult</u>			
<u>Effective March 1, 2018 - December 31, 2018</u>			
<u>REGION</u>	<u>NON-HCV COMPONENT</u>	<u>HCV COMPONENT</u>	<u>TCOC BENCHMARK</u>
	<u>(per member per month)</u>	<u>(per member per month)</u>	<u>(per member per month)</u>
Northern			
Greater Boston			
Southern			
Central			
Western			

<u>ACO TCOC Benchmark / RC I Child</u>			
<u>Effective March 1, 2018 - December 31, 2018</u>			
<u>REGION</u>	<u>NON-HCV COMPONENT</u>	<u>HCV COMPONENT</u>	<u>TCOC BENCHMARK</u>
	<u>(per member per month)</u>	<u>(per member per month)</u>	<u>(per member per month)</u>
Northern			
Greater Boston			
Southern			
Central			
Western			

<u>ACO TCOC Benchmark / RC II Adult</u>			
<u>Effective March 1, 2018 - December 31, 2018</u>			
<u>REGION</u>	<u>NON-HCV COMPONENT</u>	<u>HCV COMPONENT</u>	<u>TCOC BENCHMARK</u>
	<u>(per member per month)</u>	<u>(per member per month)</u>	<u>(per member per month)</u>
Northern			
Greater Boston			
Southern			
Central			
Western			

<u>ACO TCOC Benchmark / RC II Child</u>			
<u>Effective March 1, 2018 - December 31, 2018</u>			
<u>REGION</u>	<u>NON-HCV COMPONENT</u>	<u>HCV COMPONENT</u>	<u>TCOC BENCHMARK</u>
	<u>(per member per month)</u>	<u>(per member per month)</u>	<u>(per member per month)</u>
Northern			
Greater Boston			
Southern			
Central			
Western			

<u>ACO TCOC Benchmark / RC IX</u>			
<u>Effective March 1, 2018 - December 31, 2018</u>			
<u>REGION</u>	<u>NON-HCV COMPONENT</u>	<u>HCV COMPONENT</u>	<u>TCOC BENCHMARK</u>
	<u>(per member per month)</u>	<u>(per member per month)</u>	<u>(per member per month)</u>
Northern			
Greater Boston			
Southern			
Central			
Western			

<u>ACO TCOC Benchmark / RC X</u>			
<u>Effective March 1, 2018 - December 31, 2018</u>			
<u>REGION</u>	<u>NON-HCV COMPONENT</u>	<u>HCV COMPONENT</u>	<u>TCOC BENCHMARK</u>
	<u>(per member per month)</u>	<u>(per member per month)</u>	<u>(per member per month)</u>
Northern			
Greater Boston			
Southern			
Central			
Western			

<u>ACO Administrative Payments</u>						
<u>March 1, 2018 – December 31, 2018 (RY 18)</u>						
<u>REGION</u>	<u>RC I Adult</u> <u>(per member</u> <u>per month)</u>	<u>RC I Child</u> <u>(per member</u> <u>per month)</u>	<u>RC II Adult</u> <u>(per member</u> <u>per month)</u>	<u>RCII Adult</u> <u>(per member</u> <u>per month)</u>	<u>RC IX</u> <u>(per member</u> <u>per month)</u>	<u>RC X</u> <u>(per member</u> <u>per month)</u>
Northern						
Greater Boston						
Southern						
Central						
Western						

APPENDIX I, EXHIBIT 2
STOP-LOSS ATTACHMENT POINT

Provided below is the admission-level stop-loss attachment point for Contract Year 1 (March 1, 2018 through December 31, 2018).

<u>Admission Level Stop-Loss Attachment Point</u> <u>Effective March 1, 2018 – December 31, 2018</u>